File Number:
85~5521
For the reporting period ended December 31. 2001



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number.	3235-0337			
Expires:	July 31, 2003			
Estimated average burden				
hours per full resp	onse 6.00			
Estimated average	e burden			
hours per interme	ediate			
response	1.50			
Estimated averag	e burden			
hours per minimu	ım			
response	50			

LE	GISTEREDTURSUANT	TO SECTION 17A OF THE SECURITI	es exchange act of 19.
	ATTENTION:	INTENTIONAL MISSTATEMENTS OF CONSTITUTE FEDERAL CRIMINAL See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a)	VIOLATIONS.
(D	ll name of Registrant as stated o not use form TA-2 to change name irst Northern Communi	WINDER OF THE REAL PROPERTY OF THE PROPERTY OF	FEB 2 0 2002
a.	During the reporting period. (Check appropriate box.)	nas the Registrant engaged a service company to pe	erform any of its transfer agent functi
b.	If the answer to subsection company(ies) engaged:	(a) is all or some, provide the name(s) and tran	isfer agent file number(s) of all ser
	Name of Transfer Agent(s):		File No. (beginning with 84- or 85-):
		PRC	CESSED
		PRC	
		JUL	. 1 0 2002
c.	During the reporting period. transfer agent functions?	JUL	. 1 0 2002 OMSON
c.		JUL THO	. 1 0 2002 OMSON
	transfer agent functions?  Yes  If the answer to subsection (c	JUL  THO  nas the Registrant been engaged as a service comp  X No  is yes, provide the name(s) and file number(s) of as a service company to perform transfer agent fur	OMSON  ANGIAhamed transfer agent to perfect the named transfer agent(s) for which
	transfer agent functions?  Yes  If the answer to subsection (c Registrant has been engaged	JUL  THO  nas the Registrant been engaged as a service comp  X No  is yes, provide the name(s) and file number(s) of as a service company to perform transfer agent fur	OMSON  ANGIAhamed transfer agent to perfect the named transfer agent(s) for which
	transfer agent functions?  Yes  If the answer to subsection (c Registrant has been engaged complete and attach the Supp	JUL  THO  nas the Registrant been engaged as a service comp  X No  is yes, provide the name(s) and file number(s) of as a service company to perform transfer agent fur	DMSON ANGIA hamed transfer agent to perfect the named transfer agent(s) for which actions: (If more room is required, pl
	transfer agent functions?  Yes  If the answer to subsection (c Registrant has been engaged complete and attach the Supp	JUL  THO  nas the Registrant been engaged as a service comp  X No  is yes, provide the name(s) and file number(s) of as a service company to perform transfer agent fur	DMSON ANGIA hamed transfer agent to perfect the named transfer agent(s) for which actions: (If more room is required, pl

3.	a.	Comptroll Federal Do Board of	ppropriate reguler of the Current eposit Insurance Governors of the and Exchange	ncy e Corporati e Federal R	on Leserve Syst	(Check one bo	x only	<b>/.)</b>	`		`*	°v .
	b.					ded Form TA-l complete, or mis					e date on	which
			amendment(s) to file amendm able	ent(s)								
	c.	If the answer t	to subsection (b	) is no, pro	vide an exp	olanation:						
						7						
4.	Nu	If mber of items r	•	•	•	s 4-11 below		•			183	
5.		Total number	of individual se	curityholde	er accounts,	including acco	unts i	n the Direc	t Registrati	ion	931	
	b.					estment plan an				counts	N/A	
	c d.					as of December						as of
		Corporate Equity Securities	Corporate Debt Securities	I.	Open-End nvestment Company Securities	Limited Partnersh Securitie	ip	Municip Secur			her rities	
		100%										
6.	Nu	mber of securiti	es issues for wh	nich Regist	rant acted in	the following	capac	ities, as of	December	31:		_
					rporate curities	Open-End Investment Company	Pa	imited rtnership ecurities	Municipa Debt Securitie	Se	Other curities	
	a. b.	Receives items and maintains securityholder Receives items but does not m master security	the master files: for transfer aintain the cholder files:	Equity	Debt	Securities						
	c.	Does not receiveransfer but master security	intains the	· · ·								

		ope of certain additional types of activities performed:  Number of issues for which dividend reinvestment plan and/or.	direct nurchase plan	
•	α.	services were provided, as of December 31:		
!	Ь.	Number of issues for which DRS services were provided, as of	December 31:	
	c.	Dividend disbursement and interest paying agent activities con		
		i. number of issues		
		ii. amount (in dollars)		
			All the state of t	to the second space
8.	a.	Number and aggregate market value of securities aged record of December 31:	differences, existing for me	ore than 30 days, as of
			Prior	Current
			Transfer Agent(s) (If applicable)	Transfer Agent
		i. Number of issues		
		ii. Market value (in dollars)		
			<del></del>	
		Number of quarterly reports regarding buy-ins filed by the Reg SEC) during the reporting period pursuant to Rule 17Ad-11(c)(During the reporting period, did the Registrant file all quarterly (including the SEC) required by Rule 17Ad-11(c)(2)?	2):	
		☐ Yes ☐ No		
		[] . · · ·		
Ċ	i.	If the answers to subsection (c) is no, provide an explanation for	or each failure to file:	
9. a		During the reporting period, has the Registrant always been in as set forth in Rule 17Ad-2?	compliance with the turnar	round time for routine items
		☐ Yes ☐ No		•
		If the answer to subsection (a) is no, compl	ete subsections (i) throug	gh (ii).
		i. Provide the number of months during the reporting period compliance with the turnaround time for routine items accompliance.		
		ii. Provide the number of written notices Registrant filed durin SEC and with its ARA that reported its noncompliance with items according to Rule 17Ad-2.	n turnaround time for routi	ine
a	nd	nber of open-end investment company securities purchases and distribution postings, and address changes processed during the Total number of transactions processed:	reporting period:	_
b		Number of transactions processed on a date other than date of r	eceint of order (as ofs):	
υ	<b>,</b>	realiser of transactions processed on a date offer than date of t	eccipi or order (45 015)	***************************************
		<b>▼</b>		

11. a. During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search
4-12-01	1	0
4-16-01	3	0
8-2-01	1	0
		·

b.	Number of lost securityholder accounts that have been remitted to states during the
	reporting period:

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:	Title: AVP/Corporate Secretary/ Administrative Operations Officer Telephone number: 707-678-3041
Name of Official responsible for Form: (First name, Middle name, Last name)	Date signed (Month/Day/Year):
Lynn Campbell	1/22/02
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